

17114 U.S. PTO  
07/15/03

Docket No. 17566 (AP)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

21707 U.S. PTO  
10/621053  
07/15/03

Applicant: PETER BAKHIT, et al. )  
Serial No.: Pending )  
Filed: Herewith )  
For: OPHTHALMIC COMPOSITIONS )  
COMPRISING TREFOIL FACTOR FAMILY )  
PEPTIDES )  
Irvine, California )

Examiner:

Group Art Unit:

**NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL LETTER**

Mail Stop: Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexander, VA 22313-1450

Sir/Madam:

Enclosed herewith are the following documents:

- (x) Transmittal Letter – 3 pgs
- (x) Specification 20 pages total) consisting of 53 Claims (5 pgs) Abstract (1 pg)
- ( ) Drawings (0 sheets)
- (x) Declaration/Power of Attorney
- (x) Assignment with Recordation Cover Sheet
- ( ) Information Disclosure Statement with cited art
- (x) Return/postage paid Postcard
- (x) Express Mail Certificate No. EV295683149US

Dated: 7/15/03

Brent A. Johnson  
BRENT A. JOHNSON  
Registration No. 51,851

**CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10**

I hereby certify that the above-identified documents are being deposited with the United States Postal Service on **July 15, 2003** in an envelope as "Express Mail Post Office To Addressee" mailing label number EV295683149US with sufficient postage for Express Mail addressed to MS: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: July 15, 2003

Susan Bartholomew  
Name of person mailing paper

Susan Bartholomew  
Signature of person mailing paper

# NEW APPLICATION TRANSMITTAL FORM

To the Assistant Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled **OPHTHALMIC COMPOSITIONS COMPRISING TREFOIL FACTOR FAMILY PEPTIDES** by the following named inventor:

1.	First Name: <b>PETER</b>	Initial <b>G.</b>	Last Name <b>BAKHIT</b>	
	City <b>HUNTINGTON BEACH</b>	State or Foreign Country <b>CALIFORNIA</b>	Country Of Citizenship <b>U.S.A.</b>	
	Post Office Address <b>21661 BROOKHURST #144</b>	City <b>HUNTINGTON BEACH</b>	State or Country <b>CALIFORNIA</b>	Zip Code <b>92646</b>
2.	First Name: <b>OREST</b>	Initial	Last Name <b>OLEJNIK</b>	
	City <b>5 ADDINGTON PLACE</b>	State or Foreign Country <b>CALIFORNIA</b>	Country of Citizenship <b>U.S.A.</b>	
	Post Office Address <b>5 ADDINGTON PLACE</b>	City <b>COTO DE CAZA</b>	State or Country <b>CALIFORNIA</b>	Zip Code <b>92679</b>
3.	First Name: <b>RICHARD</b>	Initial	Last Name <b>GRAHAM</b>	
	City <b>IRVINE</b>	State or Foreign Country <b>CALIFORNIA</b>	Country of Citizenship <b>U.S.A.</b>	
	Post Office Address <b>5066 BALSABWOOD</b>	City <b>IRVINE</b>	State or Country <b>CALIFORNIA</b>	Zip Code <b>91612</b>

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 20 pages, 53 claims ( 5 pages) and an abstract (1 page).

## Oath or Declaration

(X) Enclosed is a fully executed oath or declaration.

( ) Enclosed is an unsigned oath or declaration.

(X) A self-addressed return postcard is enclosed for verification of receipt.

(X) The filing fee is calculated below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee (Large entity)			\$750.00	\$750.00
Total Claims	53 minus 20 =	-33-	\$18.00	\$594.00
Independent Claims	4 minus 3 =	-1-	\$84.00	\$18.00
If application contains any multiple dependent claims, then add			\$280.00	\$0.00
<b>TOTAL FILING FEE</b>				<b>\$1362.00</b>

- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (X) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed.
- ( ) New drawing(s) are enclosed \_\_\_ sheets.
- ( ) A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- ( ) A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- ( ) A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (X) The Power of Attorney in this application is to Brent A. Johnson, Registration Number 51,851.
- (X) The Power of Attorney appears in the Combined Declaration and Power of Attorney, filed herewith.
- ( ) A copy of the Request for Extension of Time filed in the prior application is enclosed.

Please address all future communications to:

BRENT A. JOHNSON  
 Registration No. 51,851  
 ALLERGAN, INC.  
 2525 Dupont Drive, T2-7H  
 Irvine, CA 92612  
 Tel: 714-246-4348 Fax: 714-246-4249

Respectfully submitted,



Date: 7/15/03

Brent A. Johnson  
 Registration No. 51,851  
 Patent Agent of Record